

Filed this 5th day of

State of South Dakota
Statement of Financial Interest
Candidate for Public Office

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APR - 5 2002

S.D. SEC. OF STATE

File statement in the office where your nominating petition or convention nomination certification was filed.
SECRETARY OF STATE

Please read information on reverse side before completing this form.

1. Name LAVERN O. BILLS
2. Address 826 NATIONAL
3. Office Sought REPRESENTATIVE DISTRICT #29
4. What is your occupation/profession? INSURANCE AGENT / SMALL BUSINESS OWNER

5. List any enterprise which accounted for more than ten percent of, or contributed more than \$2,000 to, your family's (includes spouse, minor children living at home) gross income in the preceding calendar year. Identify who receives the income from each enterprise.

LAVERN BILLS Insurance - Lavern Bills
SOUTH SIDE STANDARDS - Lavern Bills

What is the nature of your immediate family's association with each? The value of the financial interest need not be reported.

NONE

NONE

6. List any enterprise in which you, your spouse or minor children living at home control more than ten percent of the capital or stock. Identify who has the ownership interest in each enterprise.

SOUTH SIDE STANDARDS
LAVERN BILLS Insurance

What is the nature of your immediate family's association with each?

LAVERN BILLS - Owner

LAVERN BILLS - Agent and owner

State of South Dakota)

County of BUTTE)

) SS.

Verification

I have reviewed paragraphs 1 through 6 of the Information Regarding Statement of Financial Interest (attached), my Statement of Financial Interest and certify that the information reported is a complete, true and accurate representation of my financial interests for the preceding calendar year.

(Signed)

Lavern O. Bills

Sworn to before me this 4th day of April, 2002.



Leharita Brunner, Deputy Auditor
Officer Administering Oath

My commission expires: March 7, 2003